

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-679)

SERIAL NO.

539026

FILING DATE

3-30-00

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	WFO.	DEF.	WFO.	DEF.	WFO.	DEF.
1	1					
2						
3						
4						
6						
6						
7						
8						
9						
10						
11						
12						
13	1					
14						
16						
16						
17						
18						
19						
20						
21	1					
22						
23						
24						
25						
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27						
28						
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30						
31						
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36						
36						
37						
38						
39						
40						
41						
42	1					
43						
44						
46						
46						
47						
48						
49						
60						
TOTAL	4					
TOTAL	50					

	WFO.	DEF.	WFO.	DEF.	WFO.	DEF.
61						
62						
63						
64						
66						
66						
67						
68						
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97						
98						
99						
100						
TOTAL						
TOTAL						